State of California SPB-3002 On-Line Training Form REV 3/05

Supervisor's Work Title:

Dept. Training Coordinator:

On-Line Examination/Certification Training Registration Form

Instructions For Completing The Form: Please complete all sections of this form and either mail or fax it to the On-Line Training Program. If you are uncertain about how to complete any section, please contact the On-Line Training Program.

ATTENDEE'S INFORMATION

State Personnel Board

On-Line Training Coordinator Phone: (916) 653-0549
801 Capitol Mall, MS-55A CALNET: 8-453-0549
Sacramento, CA 95814 FAX: (916) 653-1280

Last Name:		First Name:			
E-Mail Address:	Civil Service Class:				
Agency:					
Address:					
City:	State:		Zip:		
Telephone:	CalNet:		Fax:		
Disability Accommodation needed? NO	☐ YES:	Auditory [☐ Mobility ☐ Visua	<u>] lƙ</u>	Other
SELECT TRAINING COURSE(s): **All classes are from 8:30 am - 4:30 pm, unless otherwise noted.** Exam Classes Basic Exam Class (5 Days) Exam Waiting List Exam Enhancement (1 Day) Other (Specify) Cert Classes Cert Class (3 ½ Days-last day 8:30-Noon) Cert Waiting List Cert Enhancement (1 Day)					
DATE PREFERENCE:					
1 2 3					
 REGISTRATION INFORMATION: Prerequisites: (1) Attendees must have an SPB Log-on ID of their own. (2) Attendees must have a minimum of six months experience utilizing the On-Line system. Confirmation of Enrollment: Approximately 2-4 weeks prior to the first day of class, a confirmation letter will be mailed or faxed to each attendee scheduled for that class. Waiting List: If all classes have been filled, attendees will be placed on the appropriate waiting list. All cancellations will be replaced with someone on the waiting list. Substitutions: Departments may send a substitute instead, as long as the substitute possesses the class prerequisites. Billing Information: There is no cost to Departments that have an executed contract with the SPB's On-Line Program. Cancellations may be received up to 5 working days in advance of the first day of the class without being charged a cancellation fee. Cancellations after the 5 working days prior or no-shows will be charged a \$300 cancellation fee. 					
DEPARTMENTAL APPROVAL					
Supervisor's Name (printed) Supervisor's Signature Authorizing Enrollment in Training Class(es)					
Date:					

Telephone:

Telephone: